

JUST GOALIES



Just Goalies "Just Adults" Clinic 2018 is coming to East Lansing! Join us this summer during your lunch break for a Three-Day "Just Adults" Goalie Clinic. Our Adult Clinic is a unique opportunity for high quality adult goalie training with a focus on positioning, footwork, puckhandling, improving goalie skills & fun.



* **Jason Muzzatti** (above & left)
 Founder of Just Goalies.
 16 Year Pro Goalie, former NHLer & Olympian, and current Michigan State University Goalie Coach will be your personal instructor.



★ **Just Goalies Adult Clinic** ★
Wednesday August 15 -Friday August 17
12:40PM-2:15PM
1 Hour On-Ice & 30 Minutes Video/Chalk Talk

Camp held at:
 Suburban Ice East Lansing
 2810 Hannah Blvd. East Lansing,MI

Call: **Just Goalies** at 517-381-9677
 E-mail: **JustGoalies@aol.com**
 Website: **www.JustGoalies.net**

Cut Here & Mail with Payment

Name: _____
 Address: _____
 City: _____
 Prov./State: _____ Zip/P.C. _____
 Date of Birth: _____
 Email: _____
 Home Phone: _____
 Cell Phone: _____
 # of Years as a Goalie: _____
 Level of Hockey/Current Team: _____
 Medical Problems we should be aware of: _____

Please read carefully before signing
 I acknowledge, agree and understand that there are risks inherent to the activities carried on the ice rink and other parts of the facility. I freely and knowingly assume all risks inherent to the activities carried on at the ice rink and all other parts of the facility and fully understand that said activities involve risks to the participants including bodily injury, partial or total disability, paralysis, death and damages that may arise therefrom. Therefore, I indemnify, and hold harmless **JUST GOALIES L.L.C.**, its directors, officers, agents, employees, volunteers and affiliates from any and all costs, losses, liabilities, damages, lawsuits, deficiencies, claims and expenses. In the event that my child is injured, I give permission for that person in charge to seek medical attention.

Signature: _____
Date: _____

Payment: \$300.00
 Due in Full with Sign-Up

Total Enclosed: _____

Mail Application Form and
 Check made payable to
 "Just Goalies" to:

JUST GOALIES P.O. Box 404
 Okemos, MI 48805